



Indiana Department of Environmental Management

We Protect Hoosiers and Our Environment.

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(800) 451-6027 • (317) 232-8603 • www.idem.IN.gov

Michael R. Pence
Governor

Carol S. Comer
Commissioner

December 8, 2016

Jane E. Lyons, Auditor
Madison County
16 E 9th St, Suite 101
Anderson, Indiana 46016

Dear County Auditor:

Re: Geothermal Heating/Cooling Device
Pursuant to IC 6-1.1-12-34
Property Tax Deduction for
Jonathan M Carey & Beth A. Carey
4347 W 950 S
Pendleton, Indiana 46064
Parcel Number: 48-14-32-400-011.000-
012

The above referenced claim for a property tax deduction, attached State Form 18865 and supplemental attachments, submitted by the above referenced applicant, have been reviewed by this Office in accordance with IC 6-1.1-12-35.5. Please be advised that the heating/cooling system outlined in the claim for exemption (18865) qualifies as a geothermal system as defined in IC 6-1.1-12-34. The total amount of this claim shall be pursuant to IC 6-1.1-12-34(b). This certification does not include a determination as to the total actual or depreciated value of the claimed property.

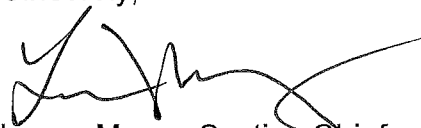
This certification is for the life of the installed equipment and does not need to be requested on an annual basis. However, when the equipment is no longer in service, the owner of the equipment for which this certification is made must give written confirmation to the assessor of the township or county in which the equipment is installed.

Additionally, this certification does not include a determination as to the timeliness of the claim nor whether the property claimed for exemption is real or personal property.



If you have any questions concerning this matter, you may contact Ms. Donna Palmer at (317) 233-0478.

Sincerely,

A handwritten signature in black ink, appearing to read 'Lance Myers', with a long horizontal flourish extending to the right.

Lance Myers, Section Chief
Operations Section
Office of Water Quality

Certification/Approval Number: 161150
Jonathan M Carey & Beth A. Carey



STATEMENT FOR DEDUCTION OF ASSESSED VALUATION (Attributed to Solar Energy System or Solar, Wind, Geothermal, or Hydroelectric Power Device)

State Form 18865 (R11 / 10-15)

Prescribed by the Department of Local Government Finance

FORM SES / WPD

INSTRUCTIONS: To be filed in person or by mail by the owner of such property with the County Auditor of the county in which the property is located. A person who is no longer eligible for this deduction shall notify the County Auditor of this change. (IC 6-1.1-12-36)

FILING DATES: (1) **Real Property:** Must be completed and dated by December 31 of the year for which the person wishes to obtain the deduction and filed or postmarked on or before January 5 of the following calendar year.
(2) **Mobile/Manufactured Home** assessed under IC 6-1.1-7: Must be completed, dated, and filed during the twelve (12) months before March 31 of the year the deduction is to be effective.
(3) **State Distributable Property** under IC 6-1.1-8 (solar powered device only): Must be completed and dated by December 31 of the year for which the person wishes to obtain the deduction and filed on or before January 5 of the following calendar year.
(4) **Personal Property** under IC 6-1.1-3 (solar powered device only): Must be completed and dated by December 31 of the year for which the person wishes to obtain the deduction and filed on or before January 5 of the following calendar year. In addition to filing this form for the deduction, an applicant must also attach a Form 103-SPD to either his personal property tax return or his amended personal property tax return for each year the deduction is desired.
(IC 6-1.1-12-26; 6-1.1-12-26.1; 6-1.1-12-27.1; 6-1.1-12-29; 6-1.1-12-30; 6-1.1-12-33; 6-1.1-12-34; 6-1.1-12-35.5; 6-1.1-12-36)

All claims for a deduction filed on a geothermal or hydroelectric system or device must be accompanied by proof of certification of qualification by the Department of Environmental Management pursuant to IC 6-1.1-12-35.5.

CERTIFICATION STATEMENT

I (We), Jonathan M Carey, Beth A Carey, certify that I (we) own or am (are) buying on contract or am (are) leasing the real property from the real property owner the following real property, mobile/manufactured home, state distributable property, or personal property that is subject to assessment and property taxation and for which a:

☐ Solar Energy Heating or Cooling System ☐ Wind Power Device ☒ Geothermal Device ☐ Hydroelectric Device

Solar Power Device*: ☐ Real ☐ Mobile/Manufactured Home ☐ State Distributable ☐ Personal Property

*Applies to a solar power device installed after December 31, 2011.

deduction from assessed valuation is hereby claimed in Madison county.

Date system/device was installed (month, day, year)

3/31/2016

Total deduction claimed

\$ 24,136

PROPERTY DESCRIPTION

Taxing District (city, town, township) 012: Fall Creek Township	Township Fall Creek Township	Legal description or key number NW SE 5.000AC
If a deduction was allowed last year, have there been any changes in the property? <input type="checkbox"/> Yes <input type="checkbox"/> No		Parcel number 48-14-32-400-011.000-012
Address of owner (number and street, city, state, and ZIP code) 4347 W 950 S Pendleton, IN 46064		
I (We) hereby certify that the above statement is true, correct, and complete.	Signature 	Date (month, day, year) 12/6/16

FOR AUDITOR'S USE ONLY

	Assessment Date First Effective 20 ____ Payable 20 ____
1 Total assessed value of real property or mobile/manufactured home including qualifying device/system.	\$
2(a) For wind; geothermal; hydroelectric; real property or mobile/manufactured home with a solar powered device: Enter the assessed valuation without the qualifying device/system.	
2(b) For solar energy system only: Out-of-pocket expenditures for components and installation labor.	
2(c) For personal property solar power device deduction: Enter amount calculated on Form 103-SPD.	
2(d) For state distributable solar power device deduction: Enter assessed value of qualifying equipment.	
3 Deduction: Line 1 minus Line 2(a); or enter the actual amount shown on Line 2(b), 2(c), or 2(d).	

VERIFICATION BY ASSESSING OFFICIAL

Is property recommended for deduction? <input type="checkbox"/> Yes <input type="checkbox"/> No	Recommended deduction	Comments, if any
Signature of assessing official	Printed name of assessing official	Date signed (month, day, year) DEC 3 2016

FINAL DETERMINATION OF COUNTY AUDITOR

Deduction determined by County Auditor for assessment date of 20 ____ payable in 20 ____	Approved Deduction FILED	
Signature of county auditor	Printed name of county auditor	Date signed (month, day, year) DEC 06 2016
Description or reasons for change: 2017 PAYABLE 2018 TAXES		

Distribution on date of filing: Original - County Auditor; File stamped copy - Applicant; File stamped copy - Township Assessor, if any, or County Assessor
Distribution on date that determination is made: Original - County Auditor; Copy - Applicant; Copy - Township Assessor, if any, or County Assessor

Precision Comfort Systems, Inc.

1011 Kendall Ct Ste 2
Westfield, IN 46074

Phone (317) 867-2665
Fax (317) 867-2666

Invoice #
212778

Date 03/31/2016

Sold to: Beth Carey
4347 W 950 S
Pendleton, IN 46064

Job Address: 4347 W 950 S

Installed (1) Energy Star Rated WaterFurnace geothermal system

Model: NDV049H114CTR0BN Serial: 160102127

With distribution

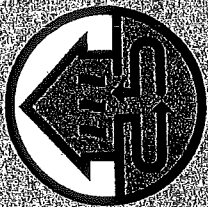
Total invoice amount

\$24,136.00

Paid in full! Thank you!

WaterFurnace®

Smarter from the Ground Up



Tax Credit Certification

Congratulations! This certifies that your geothermal equipment meets or exceeds the required guidelines for the Energy Improvement and Extension Act of 2008, H.R. 1424. By qualifying, you are now eligible to receive the federal income tax credit equal to 30% of system installation costs.

Installation Contractor Information

Name / Company: Precision Comfort Systems Inc

Installation Date: 03/31/16

Phone: (317) 867-2665

Address: 1011 Kendall Ct

Westfield IN 46074

Closed Loop Geothermal System

Efficiency > 14.1 EER & 3.3 COP**

Model Number: NDV049H114CTR0BN

Open Loop Geothermal System

Efficiency > 16.2 EER & 3.6 COP**

Model Number: _____

AHRI/ARI Data 8569829

Reference Number: _____

* Refer to efficiencies listed with Air-condition Heating and Refrigeration Institute (AHRI/ARI)

Jonathan Carey

From: Kate <Kate@precisioncomfort.com>
Sent: Tuesday, December 06, 2016 10:56 AM
To: haasjmc@aol.com
Subject: Water Furnace Unit Tonnage

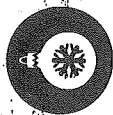
Hi Jason,

Your unit is a 4 ton.

Let me know if you need any other information and I'd be happy to find out for you.

Thanks, Kate

Kate Gonzales
Service Admin
Precision Comfort Systems
1011 Kendall Court, Suite 2
Westfield, IN 46074
317.867.2665



Jonathan & Beth Carey
4347 W 950 S
Pendleton IN 46064-9558



07 DEC 2016 PM 6:1

Indiana Dept of Environmental Mgmt
Office of Water Quality
Attn: Donna Palmer
100 N Senate Ave Room 1255
Indianapolis, IN 46204

46204-221099

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